

Congressman Baird Secures Funding for Washington Children by Expanding SCHIP (January 14, 2009)

For Immediate Release
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Washington, D.C.- Today

Congressman Brian Baird (D-WA-03) joined an overwhelming bipartisan majority to pass the State Children's Health Insurance Program Reauthorization Act of 2009 (SCHIP). When signed by President-Elect Obama, SCHIP will provide health insurance to more than 11 million American children. The law also makes permanent a provision championed by Congressman Baird last Congress that more than doubled the amount of federal funding available to Washington state.

"For years, President Bush stubbornly refused to sign this common sense piece of legislation. SCHIP helps millions of American children, including thousands who live in Southwest Washington," said Congressman Baird. "Covering more eligible children is not only the right thing to do, but it's also cost-effective for taxpayers. Families without health coverage are often forced to use the emergency room as a primary care provider. As a health care professional myself, I know a healthy child is better prepared for learning and success."

Prior to

Congressman Baird taking action, Washington and 10 other states were penalized for expanding health insurance coverage to children in families with incomes just above the poverty line before SCHIP was enacted in 1997. As a result, the state was forced to fight every few years to spend unused federal funds. States that didn't cover these children 11 years ago have had no such limitation on the use of federal SCHIP funds.

"In 2007 we were able to correct a long-standing and costly injustice for the SCHIP program by securing more money for Washington state children," said Baird. "By reauthorizing this program for another four and a half years, we're ensuring that more Washington families will be eligible for services, and more children will receive health care coverage for a long time to come."

When signed into law, the SCHIP Reauthorization Act will:

- Ensure health care coverage for 11 million American children.

The bill renews and improves the State Children's Health Insurance Program (SCHIP), reauthorizing it for four and a half years - through FY 2013. The bill ensures that the 7 million children who currently participate in SCHIP continue to receive coverage. It also extends coverage to 4 million uninsured children, according to the nonpartisan Congressional Budget Office.

- Provide resources for states to reach uninsured children who are today eligible for SCHIP and Medicaid but not yet enrolled

Two-thirds of uninsured children are currently eligible for coverage through SCHIP or Medicaid - but better outreach and adequate funding are needed to identify and enroll them. This bill gives states the resources and incentives necessary to reach and cover millions of uninsured children who are eligible for, but not enrolled in, SCHIP and Medicaid.

- Improve Access to Benefits for Children (Dental Coverage/Mental Health Parity).

Quality dental coverage will be provided to all children enrolled in SCHIP. Coverage under SCHIP will include mental health services to be provided on par with medical and surgical benefits covered under SCHIP.

- Prioritize Children's Coverage.

The legislation makes several improvements in eligibility for SCHIP.

- Pregnant Women:

This bill provides a new state option to cover pregnant women. Existing options to cover pregnant women through a state waiver or regulation are preserved.

- Parents:

No new waivers to cover parents in the SCHIP program will be allowed. States that have received waivers to cover low-income parents under SCHIP will be allowed to transition parents into a separate block grant. The federal match for services to parents covered through SCHIP will be reduced.

- Childless Adults:

The current law prohibition on waivers for coverage of childless adults is retained. Childless adults who are currently covered will transition off SCHIP. For states that have received SCHIP waivers to cover childless adults, those waivers will be terminated after a one-year period. Instead, states would receive temporary Medicaid funding for already-enrolled adults and be allowed to apply for a Medicaid waiver for any further coverage.

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